FORM P1 (Division of Pensions Regulation, s. 4 (1)(a)) CLAIM AND REQUEST FOR INFORMATION AND NOTICE

When to Use this Form

A Form P1 is used by a spouse who is making a claim to an interest in the member's/annuitant's benefits. After this form is delivered to the administrator/annuity issuer, the spouse is entitled to receive

- information from the administrator/annuity issuer about the benefits, and
- 30 days' advance notice of changes of circumstances affecting the benefits.

[Please print]

То:	Administrator of plan/annuity issuer		
	[Required] Name of plan/annuity The Pulp and Paper Industry Pension Plan		
	[Optional] Address of administrator/annuity issuer <u>c/o TELUS Health</u>		
	768 Seymour St, 11th floor, Vancouver BC V6B 3K9		
From:	Spouse of member/annuitant [Note: "spouse" includes a person who has lived in a marriage- like relationship with the member/annuitant for a continuous period of at least two years and also includes a former spouse.]		
	[Required] Name of spouse		
	[Required] Address		
	[If available] Email address		

[If available] Telephone _____

Social Insurance Number _____

[The administrator/annuity issuer will use this information to contact you about important matters. Make sure it is accurate and that you promptly advise the administrator/annuity issuer of any changes.]

In relation to: Plan member/annuitant

[Required] Name of member/annuitant ______

[Optional] Address _____

[Optional] Email address _____

[Optional] Telephone ______

[At least one of the following is required] Date of Birth, Social Insurance Number, or Plan Identity Number ______

[Optional] Employer ______

Spouse's statement

I, ______ [name of spouse] am claiming an interest in the benefits of the member/annuitant based on section 81 of the Family Law Act. [see below]

[You are not required to authorize the administrator/annuity issuer to communicate with a representative. If you wish to authorize that communication, you must complete the following, otherwise, the administrator/annuity issuer cannot communicate with your representative.]

I authorize you to communicate with and release information to my representative(s): *[include name(s) and address(es) of representative(s)]*

This authorization expires on	[date].	
Signed (spouse)		
Date of Statement		
Signed (witness to signature of spouse)		

Family Law Act, section 81:

81 Subject to an agreement or order that provides otherwise and except as set out in this Part and Part 6 *[Pension Division]*,

- (a) spouses are both entitled to family property and responsible for family debt, regardless of their respective use or contribution, and
- (b) on separation, each spouse has a right to an undivided half interest in all family property as a tenant in common and is equally responsible for family debt.

Note that the administrator/annuity issuer must respect privacy in accordance with privacy legislation.